No. C 179022		Due no later than Jun 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. BELTLINE ROAD INSURANCE AGENCY, INC. 1525 S. BELT LINE RD. COPPELL TX 75019 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Nam	nes and Busin	ess Addresses of Preside	ent, Secretary, and Directors. Treasure	r (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
TREASURER	TIMOTHY G.	N. HARCOURT	1000 ABERNATHY RD, STE 200	ATLANTA	GA	USA	30328-5604
VICE PRESIDENT	JAMES A. WELD		1000 ABERNATHY RD NE BLDG. 400 SUITE 200	ATLANTA	GA	USA	30328
DIRECTOR	EDWARD M. BOWERS		40, AVENUE MONTEREY	LUXEMBOURG CITY	LUXEMBOURG L-2163		
DIRECTOR	MICHELLE D. ESTERMAN		40, AVENUE MONTEREY	LUXEMBOURG CITY	LUXEMBOURG L-2163		
DIRECTOR	TOR KEVIN J. WILCOX		40, AVENUE MONTEREY	LUXEMBOURG CITY	LUXEMBOURG L-2163		
5. Organized Under the Laws of:		6. Annual Report must					
TX C 179022		Signature: Michelle		Date: 05/19/2015			
		Name (type or print): Michelle Donato			Title: POA		
Processed 05/19/2015		* Electronically provided signatures are accepted as original signatures.					